

### IMPROVING PREVENTIVE CARE IN SCI

*Influenza and pneumonia kill more people annually than any other vaccine-preventable disease in the U.S., while costs for their treatment total in the billions of dollars per year. Vaccination is especially important for individuals with spinal cord injury and disorder (SCI&D), who are more likely to die if they contract influenza or pneumonia than those in the general population.<sup>1</sup>*

## Improving Quality of Health for Veterans with SCI&D

### Increasing Vaccination Rates

The Spinal Cord Injury Quality Enhancement Research Initiative (SCI-QUERI) team, working with clinical, administrative, and information technology staff at 23 VHA spinal cord injury (SCI) centers across the country, implemented four interventions to increase vaccination rates for individuals with SCI&D. Interventions included:

- Patient reminder letters with educational materials,
- Practitioner education materials,
- Computerized-clinical reminders, and
- Standing orders for administration of flu vaccine by nursing staff.

Staff working on the Vaccine Initiative Project helped put these evidence-based strategies into practice by teaching skills, sharing knowledge with individuals and teams in the SCI centers, and networking throughout the VA healthcare system. The strategies were adopted by personnel in the centers, and influenza vaccination rates increased across all 23 SCI Centers. Vaccination rates for veterans with SCI&D have reached 68% for influenza vaccine and 88% for pneumococcal (PPV).<sup>2</sup>

### Smoking Cessation

Approximately one-third of veterans with SCI&D continue to smoke despite the fact that provider counseling for tobacco cessation has increased from 58% in 2003 to 84% in 2005. SCI-QUERI is developing an evidence-based smoking cessation project that includes pharmacological and psychological interventions designed to increase the number of veterans with SCI&D who choose to quit smoking.

### Obesity in Veterans with Spinal Cord Injury and Disorders

With nearly two-thirds of veterans with SCI&D being overweight or obese, SCI providers are facing a major challenge in how to assess and treat obesity. SCI-QUERI has been funded by VA's Rehabilitation Research & Development Service (RR&D) to identify and evaluate simple, practical, inexpensive bedside techniques that can be used by clinicians to determine overweight and obesity status. In addition, this study is exploring associations between obesity, functional status, clinical conditions, and quality of life in order to better define the sequelae of obesity and to target areas for future intervention.

# *How Do I Learn More ?*

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## *WEB RESOURCES*

For more information about the QUERI program in general,  
visit the national QUERI website at:

[www.hsrd.research.va.gov/queri](http://www.hsrd.research.va.gov/queri).

Access QUERI's "Guide for Implementing Evidence-Based Clinical  
Practice and Conducting Implementation Research" at:

[www.hsrd.research.va.gov/queri/implementation](http://www.hsrd.research.va.gov/queri/implementation).

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### **SCI-QUERI Executive Committee**

Each QUERI Executive Committee is co-chaired by a research expert and a clinician. The research coordinator for SCI-QUERI is **Frances M. Weaver, PhD** and clinical co-coordinators are **Barry Goldstein, MD, PhD** and **Margaret Hammond, MD**. This executive committee includes other experts, representatives of service organizations, and consumers in the field of spinal cord injury: Vivian Beyda, DrPH (United Spinal Association); Stephen Burns, MD; Fred Cowell (Paralyzed Veterans of America); Jeannette Chirico-Post, MD; Susan Garber, MA, OTR, FAOTA; David Gater, MD, PhD; Ronald J. Girona, PhD; Jennifer Hastings, PT, MS, NCS; Helen Hoenig, MD; **Phil Ullrich, PhD** (Implementation Research Coordinator); Audrey Nelson, PhD, RN; Michael Priebe, MD; Judith Schaefer, MPH; Arthur M. Sherwood, PE, PhD (National Institute on Disability and Rehabilitation Research); Ann M. Spungen, EdD; and Carol VanDeusen Lukas, EdD.

### **References:**

1. DeVivo MJ, Black KJ, Stover SL. Causes of death during the first 12 years after spinal cord injury. *Arch Phys Med Rehabil*. 1993;74:248-254.
2. Department of Veterans Affairs, Office of Quality and Performance, External Peer Review Process, 2004.